SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

LONDON, SATURDAY, AUGUST 21ST, 1926.

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British Medical Association.

CURRENT NOTES.

Remuneration of Medical Teachers and Laboratory and Research Workers.

At the Annual Representative Meeting in 1925 the Council made a recommendation with regard to the remuneration of non-professorial medical teachers and laboratory and research workers; it was accepted, and at the meeting this year it was adopted as the policy of the Association. The Council was of opinion that the remuneration of workers should be brought generally into line with the scale of minimum commencing salaries for public health medical officers—that is, that a laboratory or research worker or teacher who has served for three years on a probationary basis at a salary of £300-£350-£500 should receive at the end of that time a minimum salary of £600 per annum, and that the higher grades shall also be ensured an adequate commencing salary. The policy of the Association now is:

(*a*) That whole-time (1) non-professorial medical teachers, and (2) medically qualified laboratory or research workers should be grouped into three grades as defined below, and with the salaries as stated:

Grade III.—Comprising those who are junior workers temporarily employed on probation; no person shall remain in Grade III for more than three years.

That the minimum salaries for Grade III shall be as follows:

1st year	£300
2nd year	£350
3rd year	£500

Grade II.—Comprising laboratory or research workers or teachers who have had three years' experience in Grade III or in work of a similar character, and who are permanently and exclusively employed as such.

That the minimum commencing salary for Grade II shall be £600 per annum.

Grade I.—Comprising those of Grade II whose qualifications or duties justify a position of seniority in status and a higher remuneration.

That the minimum salary for Grade I shall be £750 per annum.

That after the probationary period (*i.e.*, Grade III) has been completed, dismissal should be possible only on grounds of neglect of duty, improper conduct, or incapacity.

(*b*) That non-professorial medical teachers and medically qualified laboratory or research workers holding part-time appointments should receive remuneration for the time engaged, at the rate of not less than £600 per annum.

Procedure in Regard to Ophthalmic Benefit under the National Health Insurance Acts.

As a good many inquiries are being received it seems desirable to make a statement for the guidance of ophthalmologists whose names are on the list of the Association as willing to give treatment to insured persons at a reduced rate. The only obligation an insurance practitioner has in connexion with this benefit is contained in the following paragraph of his terms of service:

9.—(Ia). If the condition of the patient is such as to require any ophthalmic treatment which is not within the scope of the practitioner's obligation under these Terms of Service, the practitioner, if so desired by the patient, shall in addition furnish him with a recommendation in writing signed by the practitioner that such treatment should be obtained.

There is no special form of recommendation laid down for use by insurance practitioners, but the Association has recommended them to use the following form of words:

To.....

This is to certify that I have examined you and am of opinion that you should consult an ophthalmic surgeon.

When the insured person gets such a recommendation he should present it to his approved society, and if that society is administering ophthalmic benefit it should give the insured person a written authority to consult one of the specialists on the Association's list. Any insured person who comes to an ophthalmologist on the list should be in possession of a written authority from the society to consult him, and he should be satisfied from such authority that the society will be responsible for the payment of the fee agreed upon for this work—namely, £1 1s. Those on the list would be well advised to have nothing to do with any case in which the insured person either has no written authority from his society or presents a form which does not specifically authorize the patient to consult an ophthalmologist. Many of the societies do not give their members the opportunity of obtaining expert ophthalmic opinion, but issue a form instructing them to consult an optician. It is therefore advisable for those who are on the Association's list to examine very carefully the document which the insured person presents.

Metropolitan Borough of Poplar: Medical Officer of Health.

In reference to the Current Note which appeared on August 14th informing members that the Metropolitan Borough of Poplar was insisting that the officer to be appointed medical officer of health should be or become a member of a trade union, the Medical Secretary has been informed by the Town Clerk that this impression was conveyed by an oversight in the Town Clerk's office. Nothing was said as to this provision in the advertisement offered to the British Medical Journal, or it would not have been accepted. It appears that the clause ought to have been struck out of the conditions of employment on the application form, because the provision does not apply to medical officers. We are very glad to be able to announce this fact, and to reassure those members who did not know whether they ought to apply for the post or not.

REGULAR ARMY RESERVE OF OFFICERS.

ROYAL ARMY MEDICAL CORPS.

Lieut.-Colonel and Brevet Colonel Sir A. Lisle A. Webb, K.B.E., C.B., C.M.G., and Lieut.-Colonel and Brevet Colonel P. S. Lelean, C.B., C.M.G., having attained the age limit of liability to recall, cease to belong to the Reserve of Officers.

TERRITORIAL ARMY.

ROYAL ARMY MEDICAL CORPS.

Lieut.-Colonel S. J. Fielding to be Brevet Colonel.

Major (Prov.) E. M. Douglas Morris, T.D., is confirmed in his rank, July 16th, 1925. (Substituted for notification in the *London Gazette*, July 9th, 1926).

To be Lieutenants: Captain G. E. Lindsay, M.C., late R.A.M.C., with precedence as from November 25th, 1915, and relinquishes the rank of Captain; Captain J. A. Fretton, late R.A.M.C., with precedence as from February 1st, 1916, and relinquishes the rank of Captain; James Rannie, late Surgeon Sub-Lieutenant, R.N.V.R., with precedence as from January 9th, 1926; 2nd Lieutenant E. L. Martin, late Welch Regiment, 2nd Lieutenant C. D. Bruce, late R.G.A., M. R. Coolican.

Hygiene Companies.—A. O'Hanlon to be Lieutenant.

VACANCIES.

BARNET: WELLHOUSE HOSPITAL.—Assistant Resident Medical Officer. Salary £150 per annum, rising to £200.

BATH EDUCATION AUTHORITY.—Dental Surgeon. Salary £500 per annum.

BIRMINGHAM CITY.—Assistant Medical Officer at one of the City Mental Hospitals. Salary £350 per annum, rising to £400.

BOLTON INFIRMARY AND DISPENSARY.—House-Surgeon. Salary £150 per annum.

BRADFORD CITY.—House-Physicians and House-Surgeons at the Municipal General Hospital, St. Luke's. Salary £200 per annum each.

BRISTOL GENERAL HOSPITAL.—(1) Two House-Physicians. (2) House-Surgeon. (3) Resident Obstetric Officer. (4) House-Surgeon to Special Departments. (5) Casualty House-Surgeon. Salary at the rate of £80 per annum, rising to £100 if reappointed.

BRISTOL ROYAL INFIRMARY.—(1) Two House-Physicians; (2) Four House-Surgeons; (3) House-Surgeon to Ear, Nose, and Throat Department; (4) House-Surgeon to Gynaecology, Ophthalmic, and Dermatological Departments; (5) Obstetric House-Physician; (6) Casualty House-Surgeon; (7) Dental Surgeon. Salary for (1 to 6) at the rate of £80 per annum, or £100 if selected condidate has previously held a resident appointment in the Infirmary; and for (7) £80 per annum, or £116 per annum if non-resident.

BRISTOL UNIVERSITY.—Assistant to the Professor of Surgery. Salary £400 per annum.

CARDIFF: PRINCE OF WALES'S HOSPITAL.—House-Surgeon for Cripples Hospital. Salary £100 per annum.

CITY OF LONDON MATERNITY HOSPITAL, City Road, E.C.1—Assistant Resident Medical Officer (male) Salary at the rate of £80 per annum.

ESSEX COUNTY COUNCIL.—Assistant County Medical Officer of Health. Salary £500 per annum.

HALIFAX: ROYAL HALIFAX INFIRMARY.—Fourth House-Surgeon, male, unmarried. Salary £100 per annum.

HUDDERSFIELD ROYAL INFIRMARY.—Junior House-Surgeon. Salary £150 per annum.

KETTERING AND DISTRICT GENERAL HOSPITAL.—Resident Medical Officer (male). Salary at the rate of £175 per annum.

LEICESTER ROYAL INFIRMARY.—Second House-Physician.

LEICESTERSHIRE COUNTY COUNCIL.—County Medical Officer of Health. Salary £1,200 per annum.

MANCHESTER EAR HOSPITAL, Grosvenor Square.—Non-Resident House-Surgeon. Salary at the rate of £150 per annum.

MANCHESTER ROYAL INFIRMARY.—Assistant Surgical Officer at the Central Branch (male). Salary £75 per annum.

NEWCASTLE-ON-TYNE: ROYAL VICTORIA INFIRMARY.—Resident Medical Officer (male). Salary £300 per annum, rising to £350.

NIZAM'S GUARANTEED STATE RAILWAYS CO. IN INDIA.—Second Medical Officer. Salary Rs.800 a month, rising to Rs.1,100.

NORTHAMPTON GENERAL HOSPITAL.—(1) House-Physician. (2) House-Surgeon. Salary £150 per annum each.

POPLAR HOSPITAL FOR ACCIDENTS, East India Dock Road, E.4—Second Resident Officer. Salary £175 per annum.

QUEEN CHARLOTTE'S MATERNITY HOSPITAL, Marylebone Road, N.W.1.—(1) Assistant Resident Medical Officer. Salary at the rate of £80 per annum, rising to £100 on appointment as senior resident medical officer. (2) District Resident Medical Officer. Salary at the rate of £80 per annum.

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, E.2.—(1) Two House-Physicians. (2) House-Surgeon. (3) Physician-in-charge of Skin Department. Salary for (1) and (2) at the rate of £100 per annum.

RHONDDA URBAN DISTRICT COUNCIL.—Dental Surgeon. Salary £500 per annum.

ROYAL CHEST HOSPITAL, City Road, E.C.1.—Resident Medical Officer. Salary at the rate of £150 per annum.

ROYAL EARLSWOOD INSTITUTION, Redhill.—Junior Assistant Medical Officer. Salary at the rate of £250 per annum.

ROYAL NORTHERN HOSPITAL, Holloway Road, N.7.—Casualty Officer. Salary at the rate of £90 per annum.

ST. PETER'S HOSPITAL FOR STONE, ETC., Henrietta Street, W.C.2.—House-Surgeon. Salary at the rate of £75 per annum.

SALISBURY: GENERAL INFIRMARY.—House-Surgeon (male, unmarried). Salary £150 per annum.

SHEFFIELD UNIVERSITY.—Assistant Bacteriologist. Salary £300 per annum.

SHREWSBURY DISPENSARY.—Vacancy on medical staff.

SHROPSHIRE ORTHOPAEDIC HOSPITAL, Gobowen.—Girl Students to learn orthopaedic work. Salary, first year £15, second year £20.

WATFORD: PEACE MEMORIAL HOSPITAL.—Resident Medical Officer. Salary £150 per annum.

WEST LONDON HOSPITAL, Hammersmith Road, W.6.—(1) House-Physician. (2) Two House-Surgeons (males). Salary at the rate of £100 per annum each.

CERTIFYING FACTORY SURGEONS.—The following vacant appointments are announced: Musselburgh (Edinburgh); Falkland (Fifeshire); Twickenham (Middlesex). Applications to the Chief Inspector of Factories, Home Office, S.W.1.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column advertisements must be received not later than the first post on Tuesday morning.

APPOINTMENTS.

GERRARD, W. I., M.D., M.R.C.P., D.P.H., Honorary Consulting Physician to King George V Memorial Hospital, Malta.

RICHARDSON, A. H., M.R.C.S., L.R.C.P., Radiologist to the Bury Infirmary.

SIMPSON, Harold C., L.M.S.S.A., D.P.H., Assistant County Medical Officer of Health for Cumberland.

SUTHERLAND, D. P., M.B., B.S.Lond., Honorary Lecturer in Clinical Tuberculosis at Victoria University, Manchester.

WALKER, R. R., M.D., Medical Referee under the Workmen's Compensation Act, 1925, for the districts of the County Courts of Kington (Circuit 22), Builth, Knighton, Llandrindod Wells, Presteign (Circuit 28), vice H. A. Debenham, M.R.C.S., L.R.C.P., resigned.

CERTIFYING FACTORY SURGEONS.—G. McCoull, M.B., B.S.Durh., for the Wylam District, co Northumberland; J. G. McWhirter, M.B., Ch.B. Glas., for the Whithorn District, co. Wigtown.

POST-GRADUATE COURSES AND LECTURES.

FELLOWSHIP OF MEDICINE AND POST-GRADUATE MEDICAL ASSOCIATION.—1, Wimpole Street, W.1.—*Queen's Hospital for Children*, Hackney Road, E.2. All day for two weeks. Copies of the syllabus and list of remaining special courses for 1926 can be obtained from the secretary of the Fellowship, who will also supply copies of the journal and general course programme.

GLASGOW POST-GRADUATE MEDICAL ASSOCIATION.—At Victoria Infirmary: Daily, 9.30 a.m., Clinical Medicine; 10.45 a.m., Clinical Surgery. Tues. and Thurs., 4.15 p.m., Skin Diseases. At Royal Maternity Hospital: Mon., Wed., and Fri., 2 p.m., Obstetrics. At Royal Infirmary: Mon., Wed., and Fri., 9.15 a.m., Anaesthetics. At Ear, Nose and Throat Hospital: Tues. and Thurs., 2.15 p.m., Diseases of the Ear, Nose, and Throat. At Royal Samaritan Hospital: Mon., Wed., and Fri., 4 p.m., Gynaecology. At Western Infirmary: Tues. and Thurs., 9.30 a.m., Radiology.

British Medical Association.

OFFICES, BRITISH MEDICAL ASSOCIATION HOUSE, TAVISTOCK SQUARE, W.C.1.

Departments.

SUBSCRIPTIONS AND ADVERTISEMENTS (Financial Secretary and Business Manager. Telegrams: Articulate Westcent, London).

MEDICAL SECRETARY (Telegrams: Medisecra Westcent, London).

EDITOR, *British Medical Journal* (Telegrams: Aitiology Westcent, London).

Telephone numbers of British Medical Association and British Medical Journal, Museum 9861, 9862, 9863, and 9864 (internal exchange, four lines).

SCOTTISH MEDICAL SECRETARY: 6, Drumsheugh Gardens, Edinburgh. (Telegrams: Associate, Edinburgh. Tel.: 4361 Central.)

IRISH MEDICAL SECRETARY: 16, South Frederick Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 4737 Dublin.)

AUGUST.

19 Thurs. Dumfries and Galloway Division: King's Arms Hotel, Stranraer, 3.30 p.m.; Dinner 6.30.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcement of Births, Marriages, and Deaths is 9s., which sum should be forwarded with the notice not later than the first post on Tuesday morning, in order to ensure insertion in the current issue.

MARRIAGE.

DAVIDSON—SCOTT.—At Darling's Regent Hotel, Edinburgh, on August 3rd, by the Rev. T. R. Snaddon, M.A., assisted by the Rev. J. Woodside Robinson, B.A., Thomas Wishart Davidson, M.B., Ch.B., D.P.M., elder son of Mr. and Mrs. P. W. Davidson, Homelea, Bishopbriggs, to Catherine Laidlaw, only daughter of Mr. and Mrs. John Scott, 10, Roxburgh Street, Kelso.

DEATHS.

BELL.—At Paignton, South Devon, on August 4th, 1926, after a long and trying illness patiently borne, William Bruce Bell, M.B., Ch.B., F.R.C.S.Ed., of Higher Broughton, Manchester, son of the late Robert Bell, Sheriff Substitute at Falkirk, Stirlingshire, and first cousin of the late Dr. Joseph Bell of Edinburgh.

COLE.—On August 10th, at 25, Upper Berkeley Street, W., from angina pectoris, Robert Henry Cole, M.D., F.R.C.P.

HARRISON.—At Sherburn Hall, Durham, on August 3rd, Alexander Thomas Harrison, aged 64 years, formerly Medical Officer of Health for Durham Rural District.

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Association Notices.

BRANCH AND DIVISION MEETINGS TO BE HELD.

CAPE OF GOOD HOPE (WESTERN) BRANCH.—A case night arranged by Mr. T. Lindsay Sandes and Dr. G. B. Wilkinson will be held at 35, Wale Street, Capetown, on Friday, September 24th, at 8 p.m.

SOUTH AFRICAN COMMITTEE.

A MEETING of the South African Committee of the British Medical Association was held in Capetown on May 29th, when the President, Dr. A. J. Orenstein, was in the chair.

A message of sympathy was sent to Dr. Reith Fraser during his illness, which terminated fatally.

Professor Drennan was present by invitation, and reported in detail on the action taken by the Parliamentary Subcommittee with regard to the Medical Bill before Parliament, and on the grievances of district surgeons. It was resolved to leave the first matter in the hands of the Parliamentary Subcommittee in view of the bill not being proceeded with for the present, and with reference to the second it was resolved that a deputation should interview the Minister of Justice. The Parliamentary Subcommittee was thanked for its valuable work.

The Executive Committee was authorized to request Professor Ritchie Thomson and Dr. Hugh Smith to deliver British Medical Association Lectures at Bloemfontein and at Port Elizabeth respectively.

Dr. J. Alexander Mitchell and Mr. Collie attended the meeting and made statements about the Commission on Old Age Pensions and National Health Insurance. It was decided to appoint a subcommittee to collect and prepare evidence to be given before the Commission on National Insurance in August, and to submit a draft statement thereof to all Branches of the British Medical Association and to the Central Council of the South African Medical Association for expressions of opinion.

The subcommittee was further instructed to urge before the Commission the necessity of organizing the hospital system of the Union on the lines of the Hospital Inquiry Committee's report, and to suggest that the district surgeon system should be elaborated and extended.

The meeting urged the advisability of sending a commission, which should include one medical officer, overseas to investigate insurance systems.

It was resolved that on amalgamation the South African Committee should be designated as "The Federal Council of the Medical Association of South Africa (British Medical Association)," with the Afrikaans equivalent. Arrangements were also made with regard to the election of officers and committees, and also for the amendment of the Congress Regulations. It was decided that a whole-time organizing secretary should be appointed, and that an official journal should be produced. The President was empowered to make preliminary inquiries.

The advertisement of a municipal council for an assistant medical officer was considered, and the opinion was unanimously expressed that it was highly undesirable that a medical officer in the service of a municipality should be responsible to the council through anyone else than the municipal medical officer of health. It was further decided that in the event of the appointment being offered with the objectionable condition referred to, the South African Committee would advise members of the profession not to offer themselves as candidates for the appointment without previously communicating with the honorary secretary of the committee.

The Chairman announced that Dr. Fourie, Principal Medical Officer, South-West Protectorate, had advised him that he was taking steps to obtain suitable heads for presentation to the British Medical Association House; arrangements would be made to mount them and forward them to London.

It was decided that the next meeting of the Committee should be held in Pretoria during the Congress week in October, unless it became necessary to call a meeting before that date.

National Insurance.

KENT LOCAL MEDICAL AND PANEL COMMITTEE.

THE following motion will be submitted to the forthcoming annual conference of Local Medical and Panel Committees on behalf of the Kent Local Medical and Panel Committee:

> In the opinion of this Conference the keeping of records of attendances, visits, and certificates, by each individual practitioner is neither necessary, useful, nor desirable, and should be abolished in favour of a method by which the statistical material required can be obtained from selected practitioners who are in a position to make accurate returns.

Correspondence.

Disciplinary Procedure.

SIR,—It may well be suggested that the question of professional discipline[1] is in danger of being obscured (as its solution is in danger of being prejudiced) by tinkering with isolated aspects before deciding on principles

We know exactly what we are up against. On the one side is a Ministry which regards itself as possessing such powers as a schoolmaster has. As the schoolmaster pleads his responsibilities to parents so the Minister urges that he in turn is held responsible by Parliament. On the other side we have a learned profession protesting that it is not to be dragooned as schoolboys are or disciplined like soldiers.

There is much to be said for both sides, and most of it has already been repeated to excess; but it has yet to be emphasized that new conditions require new adaptations of principle and practice, and all the old precedents are no more than a foundation on which to build. Lest I be accused as one who would adapt his principles to the dictates of convenience, may I point out that such principles as that of Ministerial responsibility are not ethical conceptions, but mere doctrines of expediency. This public service in which we are engaged can never be maintained if we admit either Ministerial autocracy or professional licence. I suggest that the following resolution outlines a workable *via media*. I have phrased it as a resolution because I hope that my Panel Committee will approve it for consideration by the forthcoming Conference.

> "That this Conference records its earnest and emphatic opinion (*a*) that decisions of a judicial character in matters of professional discipline under the National Health Insurance Acts can only be come to with propriety by those persons, duly appointed under the Regulations, who have actually heard the evidence tendered after appropriate notice to both parties to any question, and (*b*) that on the report of such persons alone the Minister of Health should base such executive action as he may deem necessary."

The effect of this resolution would be to make a sharp division between the judicial duties and executive powers of the Ministry. It is no new idea; indeed, it seems to have been contemplated by the 1924 Act as part of the normal procedure of administration. Section 91 (*c*) reads:

> "In such matters of a judicial nature arising under this Act as may be prescribed, the powers and duties of the Minister shall be exercised by him through a special body or special bodies of persons constituted in such manner as may be prescribed."

The claim of the Minister to judicial as well as executive power has brought about several things of which we complain—for example, the taking of hostile evidence unknown to defendant, the limitation of the powers of inquiry committees, judgements contrary to the findings of such committees, etc. These would be largely eliminated, and we should only be faced with abuses of the executive power. These could only be met by a right of appeal to the courts, and it would have to be shown if there was to be any chance of success that the executive action was plainly out of harmony with the judicial decision. This would not often be demonstrable, but our experiences of Ministerial action have been so bitter that we cannot afford to forgo this safeguard. It will be noted that this right of appeal would not apply to Insurance Committees, societies, or insured persons unless they suffered some detriment by the Minister's action.

In conclusion, may I say that I intend in these suggestions to contemplate "special bodies" for the judicial consideration of all questions arising between a practitioner and the Minister, whether referred from medical service subcommittees or related to excessive prescribing or record keeping. I also consider that on all such bodies at least one member should be appointed by the Panel Committee concerned or by an adjacent Panel Committee.—I am, etc.,

Sevenoaks, Aug. 15th. GORDON WARD.

Naval and Military Appointments.

ROYAL NAVAL MEDICAL SERVICE.

Surgeon Captains P. L. Crosbie to the *Egmont* for R.N. Hospital, Malta; R. W. B. Hall, O.B.E., R. W. G. Stewart, and T. W. Myles, O.B.E., to the *President*, additional for three months' post-graduate course; H. C. Whiteside to the *Vivid* for R.N. Hospital, Plymouth; H. R. H. Denny to the *Ganges* for R.N. Sick Quarters, Shotley.

Surgeon Commanders R. F. P. Cory to the *Royal Oak*; J. M. Horan to the *Caradoc* on relief; J. G. Boal to R.N. Hospital, Plymouth; W. G. Thwaytes to R.N. Hospital, Chatham.

The following Surgeon Lieutenant Commanders to be Surgeon Commanders: A. C. Shaw, R. A. Brown, A. C. V. Green.

Surgeon Lieutenant Commanders H. Wilks to the *Vulcan*; R. Lyon to R.N. Hospital, South Queensferry; L. R. Warburton, O.B.E., to R.N. Hospital, Haslar; J. F. Ainley to the *Excellent*; J. R. Brennan to the *Durban*; E. S. Mellor to the Yarmouth on completing for trooping trip.

[1] Report of Insurance Acts Committee, SUPPLEMENT, August 14th, pp. 114 and 126.

The Half-yearly Indexes.

The usual half-yearly indexes to the JOURNAL and to the SUPPLEMENT and EPITOME have been printed; they will, however, not be issued with all copies of the JOURNAL, but only to those readers who ask for them. Any member or subscriber who desires to have one or all of the indexes can obtain what he wants, post free, by sending a postcard notifying his desire to the Financial Secretary and Business Manager, British Medical Association House, Tavistock Square, W.C.1. Those wishing to receive the indexes regularly as published should intimate this desire.

THE ANNUAL EXHIBITION.

PHARMACEUTICAL AND CHEMICAL PREPARATIONS.

(Continued from page 129.)

THE extensive exhibit of Allen and Hanburys, Limited, included preparations of "iodolysin," a soluble compound of thiosinamin and iodine, offered for the treatment of rheumatism and rheumatoid arthritis; also obstetrical and surgical preparations of "pitibulin"; the preparation for obstetric use was a 10 per cent. standardized extract of the infundibular body, and the surgical a preparation double this strength, designed to be used to raise blood pressure in surgical shock and post-anaesthetic collapse. Various gland preparations were also exhibited, as well as a selection of the therapeutic serums and vaccines issued by the Lister Institute.

DIETETIC PREPARATIONS.

At more than a dozen of these stands the main exhibit was some form of special food, most frequently for infants. In many instances little more is necessary than the mention of the name of the food to conjure up an established reputation. Allen and Hanburys, Limited, showed their "Allenburys" milk and malted foods, on which by now many members of several generations must have been brought up. The food of Virol, Limited, which, it was stated, is now used in more than three thousand hospitals and clinics, was also exhibited. The name has extended to a preparation of virol and milk in powder, in which full-cream Devonshire milk is incorporated. "Virolax" is the name of a paraffin preparation. Another food product which has stood many tests, including nearly forty years' experience, is that made by Benger's Food, Limited, of Manchester. The stand at which it was displayed also had specimens of the company's other products in the shape of essences and extracts and peptonized jellies. The "Glaxo" baby made its reappearance, and the milk products here were as inviting as usual. The Glaxo firm showed "glax-ovo," a food drink with an attractive chocolate flavour, a "humanized glaxo," a full-cream dried milk, and a malted food. Here also "ostelin" was exhibited, a vitamin extract of cod-liver oil, freed from fatty constituents, and offered as a convenient means of ensuring calcium and phosphorus absorption.

Other products of the factory and the dairy were shown by Horlick's Malted Milk Company, of Slough. Food tablets were among the forms in which this preparation was exhibited. They were certainly very pleasant to the taste, and may well serve as a standby if it is necessary to go without a meal for several hours. Another milk food was shown by Trufood, Limited, of Wrenbury, Cheshire. The chief product was a humanized milk powder, consisting of cow's milk from which a certain amount of casein had been withdrawn and fresh cream and lactose added, so as to cause the analysis closely to resemble that of human milk. Another exhibit of this firm was a full cream which had been dehydrated by a special low temperature spraying process, and yet another a pure sweet whey in powder form. The "Berina" food in various forms, for expectant mothers, for nursing mothers and infants, and for use in the ordinary way for children and adults, was shown by Montgomerie and Company of Glasgow. It was stated that it was used in many hospitals in Scotland, and had found wide acceptance in the treatment of tuberculous patients.

The infant diet materials which bear the name of Mead's (the distributors of which are Brooks and Warburton, Limited) included a food for infants with cow's milk as its basis, a malt sugar for addition to cow's milk and water for infant feeding, a standardized cod-liver oil, a powdered protein milk, and a malt soup for various types of illness in infants. These materials are not advertised to the general public, and food directions are not printed on the tins, but literature and samples are sent to members of the medical profession on request. Keen, Robinson, and Company, Limited, of Norwich, which is incorporated with the firm of Colman, had also a range of foods, the principal of which was "almata," offered as suitable for the sole diet of any infant; there were various "patent" barleys and oats and other cereal preparations, making very attractive gruels and porridges. The "patent" barley of this firm, when made into barley water according to directions, contains less than 1 per cent. of starch for every feed. At the stand of Genatosan, Limited, of Loughborough, "sanatogen" was shown, and here also were some exhibits which should strictly have been enumerated among the preparations referred to in the previous section. These included formamint tablets, "nasmint," a disinfectant snuff, and a special brand of aspirin.

The usual display of concentrated fluid beef was made by Oxo, Limited, together with a special brand, peptonized and unseasoned, known as "Hospital Oxo." There were other beef essences here for invalids, and the firm showed a number of endocrine preparations in tablet and fluid extract form. Those interested in foods for diabetics found a range of these at the stand of Brusson Foods, Limited, including the "Brusson" breads, stated to be the cheapest of their kind on the market. There were other foods here in which the balance of carbohydrates and proteins had been manipulated to meet medical requirements in dealing with sufferers from diabetes, obesity, gout, and other conditions necessitating dietary supervision. A cereal meal was shown at the stand of S. Guiterman and Company, Limited—a combination of cereal, agar-agar, flax-seed meal, and bran, designed to add bulk and moisture to the waste products of digestion and so to re-establish intestinal activity along natural lines.

Finally, the Food Education Society, still better known by its recent name of the National Food Reform Association, exhibited a number of publications on dietetics and hygiene.

(To be continued.)

Meetings of Branches and Divisions.

SOUTH-WESTERN BRANCH.

THE eighty-seventh annual meeting of the South-Western Branch was held on June 23rd at Goodbody's Restaurant, Plymouth, when there was a good attendance. Mr. L. C. PANTING, F.R.C.S., presided.

The annual report of the Branch Council was presented. It showed that the membership of the Branch on December 31st, 1925, was 502, an increase of 19 over the preceding year. The financial statment showed a credit balance of £67 9s. 8d.

Mr. P. D. Warburton was re-elected honorary secretary and treasurer.

Dr. R. H. WAGNER, having succeeded Mr. L. C. Panting in the presidential chair, proposed a vote of thanks to the retiring president, and moved that he be created a vice-president; the motion was carried.

The President, in his inaugural address on medicine past and present, alluded to various aspects of medicine and surgery as practised in early Egyptian, Babylonian, ancient Irish, and Roman times, before mentioning the more striking lines of modern research from Harvey, Moreton and Simpson's work on anaesthesia, and Lister, to the present day. Dr. Wagner's many humorous comments were much enjoyed, and a vote of thanks was accorded to him for his witty and instructive address. Before the annual meeting eighty members of the Branch were entertained at the Royal Hotel, Plymouth, to luncheon, by Dr. R. H. Wagner.

The annual dinner of the Branch, which was attended by seventy-six ladies and gentlemen, including non-medical guests, was held at the Royal Hotel, Plymouth. Dr. D. O. TWINING proposed the health of the President, to which Dr. WAGNER replied. The toast of the "British Medical Association" was in the capable hands of Dr. ROPER; Dr. NOY SCOTT, in responding, gave amusing illustrations of the vast field covered by the three letters B.M.A. The toast of "The Plymouth Health Services" was proposed and acknowledged by Dr. JAQUES and the MAYOR OF PLYMOUTH respectively. Dr. A. B. SOLTAU, with a grim humour, gave the toast of "The Guests," to which the BISHOP OF PLYMOUTH responded. The toast of "The Ladies" was proposed by Dr. WAGNER, and Dr. MABEL RAMSAY replied.